



ISSUE SLIP STAPLE AREA (for additional cross references)

Best Available Copy

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	BA	10385	
O.I.P.E. CLASSIFIER		48	11/9/99
FORMALITY REVIEW	J	71531	11.18.99

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral) Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
1 ✓	2/1/94
2 ✓	8/12/94
3 ✓	
4 ✓	
5 ✓	
6 ✓	
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Claim	Date
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Original	
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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